

## POSITION STATEMENT

1. POSITION INFORMATION	
CIVIL SERVICE CLASSIFICATION:	WORKING TITLE:
Principal Compliance Representative	<i>Taxpayer Advocate Office Analyst</i>
NAME OF INCUMBENT:	POSITION NUMBER:
<i>Click here to enter text.</i>	280-620-8622-001
OFFICE/SECTION/UNIT:	SUPERVISOR'S NAME:
Taxpayer Advocate Bureau Taxpayer Advocate Office	<i>Click here to enter text.</i>
DIVISION:	SUPERVISOR'S CLASSIFICATION:
Tax Support	Tax Administrator I, EDD
BRANCH:	REVISION DATE:
Tax	3/4/2022
<b>Duties Based on:</b> <input checked="" type="checkbox"/> FT <input type="checkbox"/> PT– Fraction _____ <input type="checkbox"/> INT <input type="checkbox"/> Temporary – _____ hours	
2. REQUIREMENTS OF POSITION	
<b>Check all that apply:</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input checked="" type="checkbox"/> Conflict of Interest Filing (Form 700) Required  <input type="checkbox"/> May be Required to Work in Multiple Locations  <input checked="" type="checkbox"/> Requires DMV Pull Notice  <input checked="" type="checkbox"/> Travel May be Required         </div> <div style="width: 50%;"> <input type="checkbox"/> Call Center/Counter Environment  <input checked="" type="checkbox"/> Requires Fingerprinting &amp; Background Check  <input type="checkbox"/> Bilingual Fluency (<i>specify below in Description</i>)  <input type="checkbox"/> Other (<i>specify below in Description</i>)         </div> </div>	
<b>Description of Position Requirements:</b> (e.g., qualified Veteran, Class C driver's license, bilingual, frequent travel, graveyard/swing shift, etc.)	
Occasional travel may be required.	
3. DUTIES AND RESPONSIBILITIES OF POSITION	
<b>Summary Statement:</b> (Briefly describe the position's organizational setting and major functions)	
<p>Under the general direction of the Tax Administrator I, the incumbent will serve as a compliance expert providing programmatic support for the Tax Branch. The Principal Compliance Representative acts as a highly skilled, independent, compliance expert performing the most complex, difficult and sensitive tax functions specifically related to protecting the rights of taxpayers during the employment tax assessment and collection processes. The compliance expert uses a high degree of judgment and extensive knowledge of statutes, regulations and compliance procedures in order to investigate, analyze and respond to the most sensitive and complex issues pertaining to statewide compliance practices, policies, and legal issues. These issues may arise from correspondence of a controlled nature related to Tax Branch activities such as, audits, collections, adjustments to employer accounts, benefit charges and overpayment establishments. Such correspondence may be referred from the Governor's Office, Labor and Workforce Development Agency, the Legislature, Director of EDD or the Tax Branch Deputy Director with a specific response date. The compliance expert independently seeks, identifies, and escalates any and all opportunities to improve Tax Branch and Department operations.</p>	

Percentage of Duties	Essential Functions
40%	Uses a high degree of judgment and extensive knowledge of statutes, regulations and compliance procedures in order to investigate, analyze, and seek resolution to sensitive problems raised to the Taxpayer Advocate Office (TAO) by employer/claimants who believe they have received inequitable treatment by the Tax Branch. These problems may include, but are not limited to, accounting, audits, collection practices and customer service. Negotiate sensitive and complex issues with taxpayers, which may involve Branch and Department management and staff, elected officials, other governmental agencies or the Governor's Office. Gather data necessary and independently review the most complex and high profile cases and provide management with recommendations that will have statewide impact. Identifies, documents, and escalates TAO issues that may indicate processing or procedural deficiencies that arise during the assessment and collection of taxes.
40%	Conducts complex investigations by reviewing written complaints from employers and/or their representatives who raise issues of mistreatment or dissatisfaction or indicate that established law, policies, procedures or regulations have not been followed. Coordinates with program representatives in the research and identification of facts necessary for the development of a written response to the taxpayer or their representative.
15%	Identifies process improvement opportunities through trend analysis and other means for the enhancement of Tax Branch customer service issues.
Percentage of Duties	Marginal Functions
5%	Performs other duties as assigned.

**4. WORK ENVIRONMENT** *(Choose all that apply)*

Standing: Occasionally - activity occurs < 33%	Sitting: Frequently - activity occurs 33% to 66%
Walking: Occasionally - activity occurs < 33%	Temperature: Temperature Controlled Office Environment
Lighting: Artificial Lighting	Pushing/Pulling: Not Applicable - activity does not exist
Lifting: Not Applicable - activity does not exist	Bending/Stooping: Not Applicable - activity does not exist

Other: *Click here to enter text.*

**Type of Environment:**

☐ High Rise   ☒ Cubicle   ☐ Warehouse   ☐ Outdoors   ☐ Other:

**Interaction with Customers:**

☐ Required to work in the lobby   ☐ Required to work at a public counter  
☒ Required to assist customers on the phone   ☐ Required to assist customers in person  
☐ Other:

**5. SUPERVISION EXERCISED:**

*(List total per each classification of staff)*

None

**6. SIGNATURES**

**Employee's Statement:**

*I have reviewed and discussed the duties and responsibilities of this position with my supervisor and have received a copy of the Position Statement.*

**Civil Service Classification**  
Principal Compliance Representative

**Position Number**  
280-620-8622-001

Employee's Name: <i>Click here to enter text.</i>		
Employee's Signature:		Date:
<b>Supervisor's Statement:</b> <i>I have reviewed the duties and responsibilities of this position and have provided a copy of the Position Statement to the employee.</i>		
Supervisor's Name: <i>Click here to enter text.</i>		
Supervisor's Signature:		Date:
<b>7. HRSD USE ONLY</b>		
<b>Personnel Management Group (PMG) Approval</b>		
<input type="checkbox"/> Duties meet class specification and allocation guidelines.	PMG Analyst Initials	Date Approved
<input checked="" type="checkbox"/> Exceptional allocation, STD-625 on file.	JL	3/4/2022
<b>Reasonable Accommodation Unit use ONLY</b> <i>(completed after appointment, if needed)</i> <i>If a Reasonable Accommodation is necessary, please complete a Request for Reasonable Accommodation (DE 8421) form and submit to Human Resource Services Division (HRSD), Reasonable Accommodation Coordinator.</i> List any Reasonable Accommodations made: <i>Click here to enter text.</i>		

**Supervisor:** After signatures are obtained, make 2 copies:

- Send a copy to HRSD (via your Attendance Clerk) to file in the employee's Official Personnel File (OPF)
- Provide a copy to the employee
- File original in the supervisor's drop file